

1 of 2

CLAIMS ONLY							Application Number	Filing Date		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51			
2							52			
3							53			
4							54			
5							55			
6							56			
7							57			
8							58			
9							59			
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42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep							Total Indep			
Total Depend							Total Depend			
Total Claims							Total Claims			

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CLAIMS ONLY						Application Number	Filing Date			
						10	518229			
						Applicant(s)				
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend		
101							151			
102							152			
103							153			
104							154			
105							155			
106							156			
107							157			
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144							194			
145							195			
146							196			
147							197			
148							198			
149							199			
150							200			
Total Indep	5						Total Indep			
Total Depend	43						Total Depend			
Total Claims	48						Total Claims			